

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE


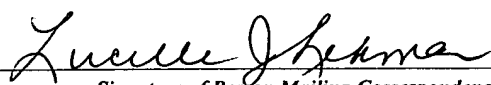
APPLICANT: NAOAKI KOMIYA)
SERIAL NO.: 10/062,651) Group Art No. 2674
FILED: January 31, 2002) Examiner: K. Nguyen
FOR: ORGANIC EL CIRCUIT) Confirmation No.2162

RESPONSE

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed February 7, 2005, Applicant requests reconsideration in view of the following remarks.

| | | | | | |
|--|-------------------------------------|------------------------------|---|-------------------------------|---------------------------------|
| AMENDMENT TRANSMITTAL LETTER (Large Entity) | | | | Docket No. YKI-0082 | |
| Applicant(s): Naoaki Komiya | | | | | |
| Application No. 10/062,651 | Filing Date Jan. 31, 2002 | Examiner K. Nguyen | Customer No. 23413 | Group Art Unit 2674 | Confirmation No. 2162 |
| <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; border-radius: 50%; padding: 10px; margin-right: 10px; text-align: center;"> RECEIVED MAY 11 2005 PATENT & TRADEMARK OFFICE </div> <div> Invention: ORGANIC EL CIRCUIT </div> </div> | | | | | |
| COMMISSIONER FOR PATENTS: | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 6 - | 20 = | 0 | x \$50.00 | \$0.00 |
| INDEP. CLAIMS | 1 - | 3 = | 0 | x \$200.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 05-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. | | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | |
|  _____ Signature | | | Dated: May 9, 2005 | | |
| Joel T. Charlton Registration No. 52,721 Customer No. 23413 | | | <div style="border: 1px solid black; padding: 5px;"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <div style="text-align: center;"> May 9, 2005 (Date) </div> <div style="text-align: center;">  Signature of Person Mailing Correspondence </div> <div style="text-align: center;"> Lucille J. Lehman Typed or Printed Name of Person Mailing Correspondence </div> </div> | | |
| CC: | | | | | |